Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW MEXICO	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1: Ident	ify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full r	name		
your government-issued picture identification (for example, your driver's		Paul First name Joseph	First name
license or	passport).	Middle name	Middle name
identification	on to your	Encinias Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
your Soci number o Individual	al Security r federal Taxpayer	xxx-xx-1667	
	Your full r Write the r your gover picture ide example, y license or Bring your identification meeting w All other r used in th Include yo maiden na Only the li your Soci number o Individual Identificati	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Encinias Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
		EIN	EIN			
5.	Where you live	2518 Camino Catalonia SE	If Debtor 2 lives at a different address:			
		Rio Rancho, NM 87124 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Sandoval				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case number (if	known)
-----------------	--------

Par	t 2: Tell the Court About	our Ban	kruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Chap	pter 7					
		☐ Chap	pter 11					
		☐ Chap	pter 12					
		■ Cha	pter 13					
8.	How you will pay the fee	at or	oout how yo	ou may pay. Typic attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details surself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with		
						on, sign and attach the Application for Individuals to Pay		
			_		(Official Form 103A).	only if you are filing for Chanter 7. By law, a judge may		
I request that my fee be waived (You may request this option only if you are filing for Chapter but is not required to, waive your fee, and may do so only if your income is less than 150% of the applies to your family size and you are unable to pay the fee in installments). If you choose this						ur income is less than 150% of the official poverty line that		
		th	e Applicati	on to Have the Ch	napter 7 Filing Fee Waived (Office	cial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	•		District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
	D		0 - 1 -	l' 40				
11.	Do you rent your residence?	No.	Go to	line 12.				
		☐ Yes.	Has y	our landlord obtair	ned an eviction judgment agains	t you?		
				No. Go to line 12				
				Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and file it as part of		

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

November 30, 2021

MM / DD / YYYY

Case	number	(if known)
Case	HUHHDEL	(II KIIOWII)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Signature of Attorney for Debtor	Date	November 30, 2021 MM / DD / YYYY
Michael K. Daniels Printed name		
Michael K. Daniels, Attorney at Law Firm name PO Box 1640		
Albuquerque, NM 87106-1640 Number, Street, City, State & ZIP Code		
Contact phone 5052469385 4807 NM	Email address	mike@mdanielslaw.com
Bar number & State		

E	in this inform					11/30/21 1:51PM
		ation to identify your				
Deb	otor 1	Paul Joseph Enci	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
			DISTRICT OF NEW M			
Uniii	led States ban	kruptcy Court for the:	DISTRICT OF NEW IVI	EXICO		
Cas (if kn	e number				_	k if this is an nded filing
		m 106Sum	and Liabilities a	nd Certain Statistical Informatio	n	42/4E
Be a	s complete ar rmation. Fill o original form	nd accurate as possibut all of your scheduk	le. If two married peoples first; then complete t	le are filing together, both are equally responsibe the information on this form. If you are filing amount the box at the top of this page.	le for supplyi	
					Your a	assets of what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	15,406.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	15,406.00
Part	t 2: Summa	rize Your Liabilities				
						iabilities nt you owe
2.			laims Secured by Propert mn A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule L</i>	D \$	1,000.00
3.			Unsecured Claims (Official 1)	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	303,245.42
				Your total liabilit	ies \$	304,245.42
Part	Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		le I	\$	6,509.94
5.	Schedule J: `Copy your mo	Your Expenses (Official onthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	6,235.00
Part	4: Answer	These Questions for	Administrative and Sta	tistical Records		
6.			er Chapters 7, 11, or 13' on this part of the form.	? Check this box and submit this form to the court with	n your other so	hedules.
7.	■ Yes What kind of	f debt do you have?				
	■ Your de	ebts are primarily cons	sumer debts. Consumer	debts are those "incurred by an individual primarily	for a personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

829.97 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	ation to identify y		115 HIIII U	g:					
•	Paul Joseph E								
1	First Name		Name		Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle	Name		Last Name				
United States Ban	kruptcy Court for th	ne: DISTRICT	OF NE\	W MEXICO					
								_	
Case number					_				Check if this is an amended filing
									_
Official For	m 106A/B								
Schedule	A/B: Pro	pperty							12/15
think it fits best. Be information. If more Answer every questi	as complete and ac space is needed, att on.	curate as possibl tach a separate sl	e. If two heet to t	married peop his form. On th	an asset fits in more t le are filing together, b ne top of any additiona wn or Have an Interesi	oth are equally res al pages, write you	ponsible for su	pplyi	ng correct
	•								
Do you own or ha	ive any legal or equi	table interest in a	ıny resic	lence, building	յ, land, or similar prop	erty?			
□ No. Go to Part 2									
Yes. Where is	the property?								
1.1			What	t is the propert	y? Check all that apply				
	no Catalonia NE			Single-family	home				r exemptions. Put
Street address, if	available, or other descri	ption			ılti-unit building				ns on Schedule D: cured by Property.
				Condominiun	n or cooperative				
				Manufacture	d or mobile home	Current	value of the	Cur	rent value of the
Rio Rancho		87124-0000				entire pr		por	tion you own?
City	State	ZIP Code		Investment p Timeshare	roperty		\$0.00		\$0.00
				Other		(such as	fee simple, tena		wnership interest by the entireties, or
			Who		t in the property? Chec	ck one a life est	ate), if known.		
Sandoval									
County				Debtor 1 and	Debtor 2 only	— Cho	ck if this is com	muni	ty proporty
				At least one	of the debtors and anoth		instructions)	mum	ty property
				r information y erty identificat	ou wish to add about ion number:	this item, such as	local		
				•	ate property of n	on-filing spous	e; value is \$	330,	000.
				<u> </u>		<u> </u>			
	r value of the next	ian wan aum fa	u all af		from Dort 1 includi	na anvantica fa			
					from Part 1, includi				\$0.00
Part 2: Describe Y	our Vehicles								
Do you own, lease					whether they are re Executory Contracts a			hicle	s you own that
someone else drive									
someone else drive 3. Cars, vans, true	cks, tractors, spo	rt utility vehicle	s, moto	orcycles					
	cks, tractors, spo	rt utility vehicle	s, moto	orcycles					

Deb	tor 1 F	Paul Joseph	Encinias		Case number ((if known)	
				and other recreational vehicles, other vehicles watercraft, fishing vessels, snowmobiles, motorcy		es	
	No						
	Yes						
4.1		Arctic		Who has an interest in the property? Check one	Do not o	deduct secured of	claims or exemptions. Put
	Model:			■ Debtor 1 only			red claims on Schedule D: aims Secured by Property.
	Year:	2016		Debtor 2 only		value of the	Current value of the
				Debtor 1 and Debtor 2 only		roperty?	portion you own?
	Other in	formation:		☐ At least one of the debtors and another			
	ATV (Califo	located in C rnia).	entral	☐ Check if this is community property (see instructions)		\$500.00	\$500.00
Part Do y	3: Descriyou own ousehold Examples:	i have attache ibe Your Perso or have any le	ed for Part 2. Writenal and Household egal or equitable urnishings	own for all of your entries from Part 2, including the that number here			\$500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
			Furniture				\$6,475.00
] No	Televisions a	phones, cameras Laptop, plays	rideo, stereo, and digital equipment; computers, p , media players, games tation, computer monitor, desktop, TV's (rasher & dryer.	·	; music collect	ions; electronic devices
	Examples:		figurines; painting ons, memorabilia,	s, prints, or other artwork; books, pictures, or othe collectibles	er art objects; sta	mp, coin, or ba	aseball card collections;
			Comic book o	collection			\$1,000.00
			DVD collectio	n, pictures.			\$150.00
	Examples:] No	t for sports ar Sports, photo musical instru	graphic, exercise,	and other hobby equipment; bicycles, pool tables	s, golf clubs, skis;	canoes and k	ayaks; carpentry tools;
			+ risnina tackie	:			⊅1∠U.UU

Debtor 1	Paul Joseph	Encinias	3		Case number	(if known)	
		s, shotguns	, ammunition, a	nd related equipment			
□ No ■ Yes	. Describe						
		Smith 8	Wessen 40	caliber handgun		7	\$400.00
		Simili	. 40	camper nanugun			
□ No		othes, furs,	leather coats, d	lesigner wear, shoes, accessor	ries		
- res	. Describe					7	
		Wearing	g apparel				\$500.00
□ No		welry, cost	ume jewelry, enç	gagement rings, wedding rings	, heirloom jewelry, watche	s, gems, go	old, silver
		Weddin	g ring			7	\$100.00
Exam	arm animals nples: Dogs, cats, l	birds, hors	es				
		Cat				7	\$20.00
□ No	ther personal and		-	id not already list, including	any health aids you did	not list	
		Lawnm	ower				\$10.00
for F	Part 3. Write that i	number he	ere	n Part 3, including any entries		ached	\$10,150.00 Current value of the portion you own? Do not deduct secured
							claims or exemptions.
■ No				home, in a safe deposit box, a	nd on hand when you file	your petitio	n
				ccounts; certificates of deposit; nts with the same institution, lis		rokerage h	ouses, and other similar
				Institution name:			
		17.1.	Checking		wned by American Ve vices, a non-operating		\$50.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Paul Joseph En	cinias			Case number (if know	n)
	1	sav	ecking & rings (8 counts)	Navy Federal Credit Unio Gopher Grabbers, LLC, s personally).		\$6.00
	1	7.3. Ch o	ecking	USAA Federal Savings Baspouse's bank account, where the benefit checks are depossinterest, Debtor has no simulation approximately	where Debtor's VA ited. No beneficial igning authority.	\$0.00
18. Bond : <i>Exam</i> ■ No	s, mutual funds, or p	ublicly tra	ded stocks counts with brokers	age firms, money market account	s	
		Instit	ution or issuer nam	ne:		
	oublicly traded stock venture	and intere	ests in incorporat	ed and unincorporated busines	ses, including an inter	est in an LLC, partnership, and
Yes	. Give specific informa	ation abou Name of			% of ownership:	
		Americ	an Veteran Prof	essional Services, LLC	100%%	\$100.00
		Gopher	Grabbers, LLC	(business is defunct).	%	\$100.00
Non-I ■ No □ Yes 21. Retire Exam □ No	negotiable instruments . Give specific informa ement or pension accuples: Interests in IRA,	tion about Issuer na counts ERISA, Ko	you cannot transfe them me:	s' checks, promissory notes, and er to someone by signing or delive by signing or delive by the someone by signing or delive by, thrift savings accounts, or othe	ering them.	g plans
■ Yes	. List each account se T	parately. Type of acc	ount:	Institution name:		
	4	01(k)		Navy pension account		\$3,000.00
	II	RA		Franklin Templeton		\$500.00
Your		posits you		t you may continue service or use lic utilities (electric, gas, water), te		anies, or others
■ No □ Yes				Institution name or individual:		
	ities (A contract for a p	periodic pa	yment of money to	you, either for life or for a numbe	r of years)	
■ No □ Yes	Issuer	name and	description.			
26 U.S	sts in an education IF B.C. §§ 530(b)(1), 529A			fied ABLE program, or under a	qualified state tuition p	orogram.
■ No □ Yes	Institut	tion name	and description. Se	eparately file the records of any in	terests.11 U.S.C. § 521(c):
25 Truete	s equitable or futuro	intorosts	in proporty (other	than anything listed in line 1)	and rights or nowers o	varaisable for your benefit

■ No

De	btor 1	Paul Joseph Encinias		Ca	ase number (if known)	
	□ Yes.	Give specific information about	them			
26.			le secrets, and other intellectual osites, proceeds from royalties and		s	
	■ No □ Yes.	Give specific information about	them			
27.		es, franchises, and other gene	ral intangibles icenses, cooperative association h	ooldings liquor license	as professional licenses	
	■ No		•	iolanigs, iiquoi iicense	ss, professional licerises	
	⊔ Yes.	Give specific information about	them			
Mo	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
		unds owed to you				
	□ No ■ Yes (Give specific information about t	hem, including whether you alread	ly filed the returns and	I the tax vears	
	— 100. V	ove opeome information about t	nom, mordaling whomor you alload	ly med the retains and	The tax years	
			2018 - 2020 are unfiled; De	obtor ovnosts to		
			owe money	eptor expects to	Federal & State	\$0.00
29.	Family	support				
	_ `	les: Past due or lump sum alimo	ny, spousal support, child support	, maintenance, divorc	e settlement, property se	ettlement
	■ No □ Voc. (Give specific information				
'	□ Yes. (Sive specific information				
30.			urance payments, disability benef	its, sick pay, vacation	pay, workers' compensa	ation, Social Security
	-	benefits; unpaid loans you	made to someone else			
	■ No □ Yes	Give specific information				
		ts in insurance policies les: Health, disability, or life insu	rance; health savings account (H	SA); credit, homeowne	er's, or renter's insurance	•
		Name the insurance company o	each policy and list its value.			
		Company		Beneficiary	r:	Surrender or refund value:
	If you a	erest in property that is due y are the beneficiary of a living trust ne has died.	ou from someone who has died st, expect proceeds from a life insu	ırance policy, or are cı	urrently entitled to receive	e property because
	■ No					
	⊔ Yes.	Give specific information				
33.			or not you have filed a lawsuit outes, insurance claims, or rights to		or payment	
	□ No					
	Yes.	Describe each claim				
			Debtor has been advised he inadequate hearing protectifiled a claim, but has no idea	on while he was in		\$1,000.00
			incu a ciaiiii, but iias iio idea	a of its value.		— — — — — — — — — —
		Г	Balanca Balanca	111.1114 21 2		
			Debtor applied for a higher of Debtor is waiting for a response		om the VA.	Unknown

Official Form 106A/B Schedule A/B: Property page 5

Debt	Paul Joseph Encinias		Case number (if known)	
_	ther contingent and unliquidated claims of every nature, inclu	uding counterclaims c	f the debtor and rights to	set off claims
	Yes. Describe each claim			
_	ny financial assets you did not already list No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includir	ng any entries for pag	es you have attached	4
	for Part 4. Write that number here			\$4,756.00
Part 5	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	te in Part 1.	
37. D o	o you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You	ı Own or Have an Interes	t In.	
	If you own or have an interest in farmland, list it in Part 1.			
46. D	o you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
ı	No. Go to Part 7.			
[Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	o you have other property of any kind you did not already list	?		
_	Examples: Season tickets, country club membership No			
	Yes. Give specific information			
				<u> </u>
54.	Add the dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5	\$500.00		
	Part 3: Total personal and household items, line 15	\$10,150.00		
	Part 4: Total financial assets, line 36	\$4,756.00		
	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property, line 52 Part 7: Total other property not listed, line 54 +	\$0.00 \$0.00		
62.	Total personal property. Add lines 56 through 61	\$15,406.00	Copy personal property t	otal \$15,406.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$15,406.00

Debtor 1	Paul Joseph Enc	inias		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXIC	:0	
Case number				
if known)				☐ Check if this is a amended filing

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Fishing tackle	\$120.00		\$120.00	11 U.S.C. § 522(d)(5)				
	LING HOM GONGGOOD PVD. G.Z			100% of fair market value, up to any applicable statutory limit					
	DVD collection, pictures. Line from Schedule A/B: 8.2	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)				
	Elio IIolii Golloddio 745. Gil			100% of fair market value, up to any applicable statutory limit					
	Comic book collection Line from Schedule A/B: 8.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	appliances, washer & dryer. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Laptop, playstation, computer monitor, desktop, TV's (3) kitchen	\$1,375.00		\$1,375.00	11 U.S.C. § 522(d)(3)				
				100% of fair market value, up to any applicable statutory limit					
	Furniture Line from Schedule A/B: 6.1	\$6,475.00		\$6,475.00	11 U.S.C. § 522(d)(3)				
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.								

Line from Schedule A/B: 9.1

100% of fair market value, up to any applicable statutory limit

De	btor 1 Paul Joseph Encinias			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Smith & Wesson .40 caliber handgun Line from Schedule A/B: 10.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule PVD. 10.1			100% of fair market value, up to any applicable statutory limit	
	Wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Wedding ring Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
	Elle Holli Genedale FVD. 12.1			100% of fair market value, up to any applicable statutory limit	
	Cat Line from Schedule A/B: 13.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)
	Ello IIolii esticasie 73 E. I ell			100% of fair market value, up to any applicable statutory limit	
	Lawnmower Line from Schedule A/B: 14.1	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Checking: Nusenda FCU (Owned by American Veteran Professional	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
	Services, a non-operating business). Line from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking & savings (8 accounts): Navy Federal Credit Union (some	\$6.00		\$6.00	11 U.S.C. § 522(d)(5)
	owned by Gopher Grabbers, LLC, some owned personally). Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	American Veteran Professional Services, LLC	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	100% Line from <i>Schedule A/B</i> : 19.1			100% of fair market value, up to any applicable statutory limit	
	Gopher Grabbers, LLC (business is defunct).	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(5)
	100% Line from Schedule A/B: 19.2			100% of fair market value, up to any applicable statutory limit	
	401(k): Navy pension account Line from Schedule A/B: 21.1	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(12)
				100% of fair market value, up to any applicable statutory limit	
	IRA: Franklin Templeton Line from Schedule A/B: 21.2	\$500.00		\$500.00	11 U.S.C. § 522(d)(12)
				100% of fair market value, up to any applicable statutory limit	

Debtor	1 Paul Joseph Encinias					
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption	
	ebtor has been advised he may ave a claim against 3M for	\$1,000.00	•	\$1,000.00	11 U.S.C. § 522(d)(5)	
in: he bu	adequate hearing protection while was in the Navy. He filed a claim, at has no idea of its value. The from Schedule A/B: 33.1	☐ 100% of fair market value, up to any applicable statutory limit				
	e you claiming a homestead exemption of ubject to adjustment on 4/01/22 and every 3	, ,		r after the date of adjustmer	nt.)	
	Yes. Did you acquire the property covere ☐ No ☐ Yes	ed by the exemption wi	thin 1,215 day	ys before you filed this case	?	

					11/30/21 1:51F
Fill in this informatio	n to identify you	ır case:			
Debtor 1 P	aul Joseph En	cinias			
	rst Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) Fi	rst Name	Middle Name Last Name			
United States Bankrup	otcy Court for the:	DISTRICT OF NEW MEXICO			
Case number(if known)				_	if this is an led filing
Official Form 10	06D				
Schedule D:	Creditors	Who Have Claims Secured	by Property	У	12/15
is needed, copy the Addinumber (if known).	itional Page, fill it o	If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do any creditors have	claims secured by	your property?			
☐ No. Check this	box and submit the	his form to the court with your other schedules. Yo	ou have nothing else to	o report on this form.	
Yes. Fill in all o	f the information	below.			
Part 1: List All Sec	cured Claims				
for each claim. If more th	an one creditor has	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 Freedom Roa	d Financial	Describe the property that secures the claim:	value of collateral. \$1,000.00	claim \$500.00	If any \$500.00
Creditor's Name	u i ilialiciai	2016 Arctic	φ1,000.00	φ300.00	φ300.00
		ATV (located in Central California).			
		As of the date you file, the claim is: Check all that			
10605 Double Reno, NV 895		apply.			
Number, Street, City,		☐ Contingent ☐ Unliquidated			
Number, Street, City,	State & Zip Code	☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the del	btors and another	☐ Judgment lien from a lawsuit			
Check if this claim recommunity debt	elates to a	Other (including a right to offset)			
	2016	Last 4 digits of account number			
Date debt was incurred					
•					
Date debt was incurred		olumn A on this page. Write that number here:	\$1,00	0.00	
Date debt was incurred Add the dollar value of	of your entries in C	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$1,00 \$1,00		

than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

										11/30/21 1:51PM
Fil	l in this inform	ation to identify your	case:							
De	ebtor 1	Paul Joseph Enci	nias							
		First Name		e Name	Last Nam	ie				
	ebtor 2 ouse if, filing)	First Name	Middle	e Name	Last Nam					
(Sp	ouse II, IIIIIg)	First Name			Last Naii	le				
Un	ited States Ban	kruptcy Court for the:	DISTRICT	F OF NEW MEXICO						
1	se number									
(if k	nown)									if this is an
_					_				amend	ed filing
Of	ficial Form	106F/F								
		/F: Creditors W	ho Hav	a Unsacurad	Claim	•				12/15
		accurate as possible. Us						DDIODITY.		
left. nan	Attach the Contine and case num	rs Who Have Claims Section Page to this pag ber (if known). of Your PRIORITY Un	e. If you hav	e no information to rep						
١.	No. Go to Pa	s have priority unsecured	i ciaims aga	inst you?						
	_	III 2.								
2	Yes.	priority unsecured claims	If a graditar	has more than one price	rity upoo	rad alaim lia	t the graditar congrets	ly for onch o	loim For	and alaim listed
2.	identify what type possible, list the	e of claim it is. If a claim ha claims in alphabetical orden nan one creditor holds a pa	s both priority r according to	y and nonpriority amount o the creditor's name. If y	s, list that you have r	claim here a	nd show both priority a	nd nonpriori	ty amount	ts. As much as
	(For an explanat	tion of each type of claim, s	ee the instruc	ctions for this form in the	instruction	booklet.)				
	_					ŕ	Total claim	Priority amount		Nonpriority amount
2.1	IRS			Last 4 digits of accour	nt number		Unknown		\$0.00	\$0.00
	Priority Cree	ditor's Name				T	2040 2020			
	PO Box	7346 phia, PA 19101-7346	:	When was the debt inc	curred?		rs 2018 - 2020 s unfiled)			
		eet City State Zip Code	<u>, </u>	As of the date you file.	the claim	is: Check a	II that apply			
	Who incurred	the debt? Check one.		☐ Contingent			,,,			
	Debtor 1 or	nly		☐ Unliquidated						
	Debtor 2 or	nly		☐ Disputed						
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns	ecured cl	aim:				
	☐ At least one	e of the debtors and anothe	r	☐ Domestic support of	oligations					
	☐ Check if th	is claim is for a commun	ity debt	Taxes and certain of	ther debts	you owe the	government			
		ubject to offset?		\square Claims for death or p	oersonal in	jury while yo	u were intoxicated			
	■ No			Other Specify						

Personal income tax

☐ Yes

Debto	Paul Joseph Encinias		Case number (if known)		
2.2	NM Taxation & Revenue	Last 4 digits of account number	Unknown	\$0.00	\$0.00
	Priority Creditor's Name PO Box 8575	When was the debt incurred?	Tax years 2018 - 2020		
	Albuquerque, NM 87198-8575				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	_	☐ Contingent			
■ Debtor 1 only		Unliquidated			
	Debtor 2 only	☐ Disputed			
[Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:		
	At least one of the debtors and another	☐ Domestic support obligations			
[☐ Check if this claim is for a community debt	Taxes and certain other debts			
_	s the claim subject to offset?	Claims for death or personal in	ijury while you were intoxicated		
	No	Other. Specify			
	☐ Yes	Personal i	income tax (returns unfiled)		
4. Lis	No. You have nothing to report in this part. Submit Yes. Ist all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	e alphabetical order of the creditor laim. For each claim listed, identify w	who holds each claim. If a creditor has no that type of claim it is. Do not list claims alro	eady included in Par	rt 1. If more n Page of
4.1	ATOT Machilian	Last 4 digits of account num	hor	Total olali	
4.1	AT&T Mobility Nonpriority Creditor's Name				\$3,000.00
	11760 US Highway 1	When was the debt incurred?	·		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	cured claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No		haring plans, and other similar debts		
	□Yes		one service; debt of Gopher		

Official Form 106 E/F

Debtor	Paul Joseph Encinias	Case number (if known)	
4.2	Audi Financial Services	Last 4 digits of account number 2321	\$19,220.73
	Nonpriority Creditor's Name PO Box 3	When was the debt incurred? 2018	
	Hillsboro, OR 97123-0003	2010	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	– No	_ Repossession deficiency for 2018 Audi Q7	
	Yes	Other. Specify (debt of Gopher Grabbers)	
4.3	Audi Financial Services	Last 4 digits of account number 7523	\$23,418.82
	Nonpriority Creditor's Name PO Box 3	When was the debt incurred?	
	Hillsboro, OR 97123-0003	When was the dept incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Repossession deficiency for 2018 Audi SQ5	
4.4	BMW of North America, LLC	Last 4 digits of account number 6241	\$29,184.75
	Nonpriority Creditor's Name 300 Chestnut Ridge Rd.	When was the debt incurred? 2018	
	Woodcliff Lake, NJ 07677-7731		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Repossession deficiency 2018 BMW 540d, Other. Specify (debt of Gopher Grabbers).	

Debtoi	Paul Joseph Encinias	Case number (if known)	
4.5	Comenity Bank	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name Bankruptcy Department PO Box 182273	When was the debt incurred?	
	Columbus, OH 43218-2273		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify American Home Furniture credit card account	
4.6	Dillard's Card Services	Last 4 digits of account number 4200	\$3,495.89
	Nonpriority Creditor's Name MAC N0003-038	When was the debt incurred?	
	800 Walnut St.		
	Des Moines, IA 50309	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	
4.7	Fundbox Neposite if the Conditionin Name	Last 4 digits of account number	\$12,000.00
	Nonpriority Creditor's Name 400 S. Baldwin Ave.	When was the debt incurred?	
	Westfield Santa Anita Mall		
	Arcadia, CA 91007-1900	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	<u>_</u>	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Line of credit; debt of Gopher Grabbers	

Debtor	Paul Joseph Encinias	Case number (if known)	
4.8	Jessica N. Espinoza	Last 4 digits of account number	\$25,000.00
	Nonpriority Creditor's Name 2324 W. Ella St.	When was the debt incurred?	
	Hanford, CA 93230 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Property settlement.	
4.9	Military Star	Last 4 digits of account number	\$1,231.98
	Nonpriority Creditor's Name The Exchange	When was the debt incurred?	
	PO Box 740890 Cincinnati, OH 45274-0890		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	,	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	— 163	Orreit Specify Orcult Gard	
4.1 0	Navy FCU	Last 4 digits of account number 4644	\$1,612.81
	Nonpriority Creditor's Name PO Box 3000	When was the debt incurred?	
-	Merrifield, VA 22119-3000 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dain is. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Line of credit	

Dobt	or 4. B I I I . E I	Coop number (v)	11/30/21 1:51PN
Debti	Paul Joseph Encinias	Case number (if known)	
4.1 1	Navy FCU	Last 4 digits of account number 5453	\$1,109.00
<u> </u>	Nonpriority Creditor's Name 2600 San Pedro Dr. NE Albuquerque, NM 87110	When was the debt incurred?	, , , , , , , , , , , , , , , , , , ,
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	
4.1	Navy FCU	Last 4 digits of account number 0992	\$13,721.47
2	Nonpriority Creditor's Name		Ψ10,121.41
	PO Box 3000	When was the debt incurred?	
	Merrifield, VA 22119-3000	As of the data way file the plains in Obsale all that each	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	
4.1	Novy ECU	Last 4 digits of account number 9175	\$6,203.51
3	Navy FCU Nonpriority Creditor's Name	Last 4 digits of account number 91/5	\$0,2U3.5T
	2600 San Pedro Dr. NE Albuquerque, NM 87110	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Debt of Gopher Grabbers

Is the claim subject to offset?

Paul Joseph Encinias	Case number (if known)	11/30	
<u> </u>			
OnDeck Capital, Inc.	Last 4 digits of account number	\$34,	
Nonpriority Creditor's Name 1400 Broadway 25th Floor	When was the debt incurred?		
25th Floor New York, NY 10018-5225			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt	\square Obligations arising out of a separation agreement or divorce that you did not		
ls the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Business loan; Debt of Gopher Grabbers		
Presbyterian	Last 4 digits of account number	\$8,	
Nonpriority Creditor's Name	Last 4 digits of account fidinger	Ψ0,	
Attn. Patient Accounting PO Box 26268	When was the debt incurred?		
Albuquerque, NM 87125-6268 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
s the claim subject to offset?	report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Medical services (ER visit)		
US Bank	Last 4 digits of account number 3059	\$24,	
Nonpriority Creditor's Name	Last 4 digits of account number 3059	⊅∠4 ,	
111 SW Fifth St. Portland, OR 97204	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		

Official Form 106 E/F

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ Other Specify Line of credit; Debt of Gopher Grabbers

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

 \square Check if this claim is for a community

☐ Disputed

☐ Student loans

report as priority claims

11/30/21 1:51PM Debtor 1 Paul Joseph Encinias Case number (if known) 4.1 **US Bank** 4920 \$7,296.52 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5227 When was the debt incurred? CN-OH-W15 Cincinnati, OH 45202-5227 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Repossession deficiency for 2014 Toyota ☐ Yes Other. Specify Prius; Debt of Gopher Grabbers. 4.1 **US Bank** 2670 \$38,000.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 7900 Jefferson St. NE 2017 When was the debt incurred? Albuquerque, NM 87109 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts SBA Small Business loan; Debt of Gopher ☐ Yes Other. Specify Grabbers 4.1 **US Bank Cardmember Service** 2266 \$14,009.12 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 6352 Fargo, ND 58125-6352 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

Official Form 106 F/F

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Credit card; Debt of Gopher Grabbers.

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

☐ Disputed

☐ Student loans

report as priority claims

R. Ruben Gallegos 116 14th St. SW

Name and Address

PO Box 650410

Name and Address

Name and Address

Official Form 106 E/F

Dallas, TX 75265-0410

Presbyterian Healthcare

9521 San Mateo Blvd. NE

Albuquerque, NM 87113

Military Star

Schedule E/F: Creditors Who Have Unsecured Claims

Line 4.9 of (Check one):

Last 4 digits of account number

Last 4 digits of account number

Line 4.15 of (Check one):

Line 4.2 of (Check one):

On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

			11/30/21 1:51PI
Debtor 1 Paul Joseph Encinias		Case number (if known)	
Albuquerque, NM 87102		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	Tart 2. Groundle married priority chaecoard claims	
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?	
Small Business Administration	Line 4.18 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
409 3rd St. SW Washington, DC 20416		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?	
Sunrise Credit Services, Inc.	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 9100 Farmingdale, NV 11735-9100		■ Part 2: Creditors with Nonpriority Unsecured Claims	

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Wells Fargo Card Services**

Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 522 ■ Part 2: Creditors with Nonpriority Unsecured Claims Des Moines, IA 50306-0522

Last 4 digits of account number

Last 4 digits of account number

Last 4 digits of account number

Line 4.2 of (Check one):

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims	01		01	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	- 3	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 303,245.42
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 303,245.42

Name and Address

8920 Pan American Freeway NE

Albuquerque, NM 87113

VW Credit

Fill in this inforr	mation to identify your	case:		
Debtor 1	Paul Joseph Enci	inias		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW MEXICO		
Case number _				☐ Check if this is a
(amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
					_
2.2	City		State	ZIP Code	
2.2	Name				_
	Ivaille				
	Number	Chroat			_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3					
	Name				_
	Number	Street			_
					_
	City		State	ZIP Code	
2.4					_
	Name				
					_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

				11/00/21 1.511 W
Fill in this	s information to identify your	case:		
Debtor 1	Paul Joseph Enc	inias		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW MEXIC	0	
Case num (if known)	nber			☐ Check if this is an amended filing
Officia	J Form 106U			
	ıl Form 106H Jule H: Your Cod	obtoro		
Scried	ule n. Toul Cou	entors		12/15
people are fill it out, a your name	e filing together, both are equ	ally responsible for supplyir boxes on the left. Attach the . Answer every question.	ng correct information e Additional Page to t	complete and accurate as possible. If two married n. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write a codebtor.
■ No				
	thin the last 8 years, have you na, California, Idaho, Louisiana,			(Community property states and territories include ton, and Wisconsin.)
□ №	. Go to line 3.			
	s. Did your spouse, former spou	use, or legal equivalent live wit	th you at the time?	
		oo, or logal oquivalent live with	ar you at the time.	
	□ No			
	Yes.			
	In which community state Courtney Encinias 2518 Camino Catalo	e or territory did you live?	New Mexico	Fill in the name and current address of that person.
	Rio Rancho, NM 871 Name of your spouse, former spo	24 ouse, or legal equivalent		
	In which community state Jessica Espinoza 2324 W. Ella St. Hanford, CA 93230 Name of your spouse, former spouse, former spouse, Street, City, State & Zip		California	Fill in the name and current address of that person.
in lin Form	lumn 1, list all of your codebt e 2 again as a codebtor only i	ors. Do not include your spo f that person is a guarantor	or cosigner. Make su	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official B). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
20				Cabadda D line
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line
				☐ Schedule G, line

Debtor 1	Paul Joseph Encinias			Ca	ase number (if known)
	Additional P	age to List M	ore Codebtors		
	Column 1: Y	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	Number	Street			-
	City		State	ZIP Code	

Schedule H: Your Codebtors

Page 2 of 2
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	in this information to btor 1	o identify your ca Paul Joseph								
		raui Josepi	Elicilias			_				
	btor 2 buse, if filing)					_				
Uni	ited States Bankrupt	tcy Court for the	: DISTRICT OF NEW M	IEXICO						
	se number						Check if this is			
									ring postpetition che following date:	napter
<u>O</u>	fficial Form	106I					MM / DD/	/YYY		
S	chedule I: `	Your Inc	ome							12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse de infor	is liv matio	ing with you, incl on about your sp	ude info ouse. If r	rmation about you nore space is ne	our eded,
1.	Fill in your emplo	oyment		Debtor 1			Debtor	2 or non	-filing spouse	
	If you have more to		Employment status	☐ Employed			■ Empl	oyed		
	attach a separate information about	1 - 3 -	Employment status	■ Not employed			☐ Not e	mployed	1	
		employers.	Occupation	-						
	Include part-time, self-employed wo		Employer's name				Tricore)		
	Occupation may in or homemaker, if it		Employer's address						rd Pl. NE NM 87102	
			How long employed th	nere?				l month	1	
Par	rt 2: Give Det	tails About Mor	nthly Income							
	imate monthly inco		ate you file this form. If y	ou have nothing to re	eport for	any I	ine, write \$0 in the	space. I	nclude your non-fi	iling
	ou or your non-filing e space, attach a se		ore than one employer, co	mbine the informatio	n for all e	emplo	oyers for that perso	on on the	lines below. If you	u need
							For Debtor 1		Pebtor 2 or illing spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$	0.00	\$	2,031.73	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	

4. Calculate gross Income. Add line 2 + line 3.

0.00

2,031.73

Debtor 1	Paul Joseph Encinias	_	Case number (if kr	iown)			
C	opy line 4 here	4.	For Debtor 1	0.00	For Debto		
5. Li	st all payroll deductions:						
5a		5a.	\$ 0	0.00	\$	200.07	
5b	. Mandatory contributions for retirement plans	5b.		0.00	\$	0.00	_
50	,	5c.	\$ 0	0.00	\$	121.90	_
50	, , ,	5d.		0.00	\$	0.00	-
5e		5e.		0.00	\$	0.00	-
5f	•	5f.		0.00	\$ \$	0.00	-
5g 5h		5g. 5h.+	· · · · · · · · · · · · · · · · · · ·	0.00	· · · · · · · · · · · · · · · · · · ·	0.00	-
	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	·	0.00	, ψ \$		=
		7.	·			321.97	-
	alculate total monthly take-home pay. Subtract line 6 from line 4. st all other income regularly received:	7.	\$	0.00	Ф	1,709.76	-
81 80 80 86 86 86 86	 Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income 	8c. 8d. 8e.	\$ 0 \$ 0 \$ 0 \$ 0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.18	\$	0.00 0.00 479.82 0.00 0.00 0.00 2,160.18	-
9. A	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$).18	\$	2,640.00	0
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2,160.18	+ \$_	4,349.76	6 = \$	6,509.94
In ot Do	tate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your her friends or relatives. To not include any amounts already included in lines 2-10 or amounts that are not secify:	r depen			ted in <i>Schedu</i>	ıle J. . +\$	0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certa applies					. \$	6,509.94
13 D	o you expect an increase or decrease within the year after you file this form	12				Combir monthl	ned y income
13. D	No.						

Fill	in this informa	ition to identify yo	our case:			Ī		
Deb		Paul Joseph				Chec	ck if this is:	
		raui Joseph	Elicilia	•			An amended filing	
	tor 2 ouse, if filing)						A supplement shown 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW MEXICO		-	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	. If two married people and the control of the cont				
Par		ribe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ 1es. Doe		п а зера	ate nousenoid:				
		-	st file Offic	al Form 106J-2, Expenses	s for Separate House	ehold of Debi	tor 2.	
2.	Do vou hav	e dependents?	□ No					
۷.	•	Debtor 1 and Yes. Fill out this information each dependent			Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state dependents			Son		1	□ No ■ Yes	
					Stepson		4 ■ Ye	□ No ■ Yes
								□ No □ Yes
								□ No
3.	Do vour exi	oenses include	_					☐ Yes
o.	expenses o	f people other to d your depende	han 👝	No Yes				
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance is luded it on <i>Schedule I:</i> Y			Your exp	enses
(011	iciai i Oilli i C	,01.,						
4.	The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot.					e 4. \$	i	1,805.00
	If not include	led in line 4:						
		estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses
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Deb	tor 1 Paul Joseph Encinia	s	Case num	ber (if known)					
_	Hallidaa			_					
6.	Utilities: 6a. Electricity, heat, natural of	vae	6a.	¢	220.00				
	6b. Water, sewer, garbage of		6b.	·	220.00 220.00				
		nternet, satellite, and cable services		·					
	6d. Other. Specify:	itemet, satellite, and cable services	6c.	· :	200.00				
7.	Food and housekeeping supp	aliae	6d. 7.		0.00				
7. 8.	Childcare and children's educ		7. 8.	*	700.00				
o. 9.	Clothing, laundry, and dry cle		9.		1,600.00				
	Personal care products and s	=	9. 10.	· · · · · · · · · · · · · · · · · · ·	0.00				
			11.	·	20.00				
11.	•		11.	Φ	220.00				
12.	Transportation. Include gas, me Do not include car payments.	naintenance, bus or train fare.	12.	\$	80.00				
13.		ion, newspapers, magazines, and books	13.	·	0.00				
	Charitable contributions and		14.	·	0.00				
	Insurance.	rengious denations	17.	Ψ	0.00				
13.		cted from your pay or included in lines 4 or 20.							
	15a. Life insurance	olog from your pay or included in imos 1 or 20.	15a.	\$	0.00				
	15b. Health insurance		15b.	·	220.00				
	15c. Vehicle insurance		15c.	· · · · · · · · · · · · · · · · · · ·	160.00				
	15d. Other insurance. Specify:		15d.	· ———	0.00				
16		ducted from your pay or included in lines 4 or 20.		—	0.00				
10.	Specify:	ducted from your pay or included in lines 4 or 20.	16.	\$	0.00				
17	Installment or lease payments	g·			0.00				
	17a. Car payments for Vehicle		17a.	\$	0.00				
	17b. Car payments for Vehicle		17b.	· ———	0.00				
	17c. Other. Specify: Stude		17c.	*	240.00				
	17d. Other. Specify: Stude		17d.	· .	50.00				
				\$	300.00				
	Nonfiling spouse cre			\$					
10	Nonfiling spouse cre	eart card aintenance, and support that you did not report a		Ψ	200.00				
10.		ne 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00				
19		support others who do not live with you.	•	\$	0.00				
	Specify:	support suite at the first true year	19.	Ψ	0.00				
20.	. ,	not included in lines 4 or 5 of this form or on Sch		our Income.					
_0.	20a. Mortgages on other prop		20a.		0.00				
	20b. Real estate taxes	•	20b.	\$	0.00				
	20c. Property, homeowner's, o	or renter's insurance	20c.	· :	0.00				
	20d. Maintenance, repair, and		20d.	*	0.00				
	20e. Homeowner's association		20e.	·	0.00				
21	Other: Specify:			+\$					
۷۱.	Other. Specify.			ΤΨ	0.00				
22.	Calculate your monthly exper	nses							
	22a. Add lines 4 through 21.			\$	6,235.00				
	22b. Copy line 22 (monthly exp	enses for Debtor 2), if any, from Official Form 106J-2		\$					
		e result is your monthly expenses.		\$	6,235.00				
		Title year menting expended.			0,233.00				
23.	Calculate your monthly net in								
		ined monthly income) from Schedule I.	23a.	·	6,509.94				
	23b. Copy your monthly exper	nses from line 22c above.	23b.	-\$	6,235.00				
		penses from your monthly income.			274.04				
	The result is your monthly	y net income.	23c.	\$	274.94				
0.4	Da varia sum and and linear	decrees in very company and the discount of	4:1 - 41 *						
24.	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a								
	modification to the terms of your mo		ui mongage	payment to increase	OF GEOLEGISE DECAUSE OF A				
	No.	J- J-							
	_								
	☐ Yes. Explain here:								

Official Form 106J Schedule J: Your Expenses
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Debtor 1	Paul Joseph En	cinias		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW ME	XICO	
if known)				☐ Check if this is ar amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Dio	I you pay or agree to pay someone who is NOT an attorney to	help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	ler penalty of perjury, I declare that I have read the summary a they are true and correct.	nd s	chedules filed with this declaration and
X		X	
	Paul Joseph Encinias Signature of Debtor 1		Signature of Debtor 2
	Date November 30, 2021		Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

E	l in this inform	nation to identify you				
De	btor 1	Paul Joseph En First Name	CINIAS Middle Name	Last Name		
	btor 2	First Name	Middle Name	Lost Nome		
	ouse if, filing)	First Name		Last Name		
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF NEW MEX	KICO		
1	se number _					
(if k	nown)				_	Check if this is an amended filing
\bigcap	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for E	Rankruntov	A 14 C
						4/19
info	rmation. If m		attach a separate sheet to		equally responsible for su y additional pages, write yo	
		, , , , ,	arital Status and Where Yo	u Lived Before		
1.	What is your	r current marital statu	ıs?			
	Married					
	□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	_	t all of the places you	lived in the last 3 years. Do r	not include where you live nov	٧.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	ddress:	Dates Debtor 2
	4504 Via V	Jacone Dr. SE	lived there From-To:	П		lived there
	-	esane Dr. SE no, NM 87124	May of 2016 through June 2019	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
3. stat	es and territori	es include Arizona, Ca		evada, New Mexico, Puerto R	nity property state or territor Lico, Texas, Washington and V	
Pa	rt 2 Evolai	n the Sources of You	vr Incomo	,		
ıa	Схріаі	Title Sources of Toc	ii iiicoiiie			
4.	Fill in the tota	al amount of income yo	ou received from all jobs and	ng a business during this y all businesses, including part ve together, list it only once u		endar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
						,

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2020)	☐ Wages, commissions, bonuses, tips	\$5,000.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
	r the calend anuary 1 to			☐ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips	
				Operating a business		☐ Operating a business	
5.	Include include and other winnings.	come regar public bene If you are fi	dless of wheth fit payments; ling a joint cas	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter- se and you have income that y ome from each source separat	imples of other income are a est; dividends; money collec- ou received together, list it of	limony; child support; Social S ted from lawsuits; royalties; an only once under Debtor 1.	
	□ No						
	Yes.	Fill in the d	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:	VA Disability Benefits	\$19,260.00	VA Disability Benefits	\$23,760.00
	r last calen anuary 1 to		31, 2020)	VA Disability Benefits	\$25,680.00	VA Disability Benefits	\$31,680.00
	r the calend anuary 1 to			VA Disability Benefits	\$10,800.00	VA Disability Benefits	\$31,680.00
Pa	rt 3: List	Certain Pa	ayments You	Made Before You Filed for E	Bankruptcy		
6.		Neither D	ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	mer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
			•	ore you filed for bankruptcy, did	d you pay any creditor a tota	I of \$6,825* or more?	
		□ _{No.} □ _{Yes}	Go to line 7 List below 6	'. each creditor to whom you paid	d a total of \$6,825* or more i	n one or more payments and	the total amount you
			paid that cr not include	editor. Do not include paymen payments to an attorney for the ton 4/01/22 and every 3 years	ts for domestic support oblignis bankruptcy case.	gations, such as child support	and alimony. Also, do
	Yes.	•	•	or both have primarily consu		or after the date of adjustment	ι.
	- res.			ore you filed for bankruptcy, did		I of \$600 or more?	
		■ No.	Go to line 7	.			
		□ Yes	include pay	each creditor to whom you paid ments for domestic support ob this bankruptcy case.			
	Creditor's	s Name an	d Address	Dates of paymen	nt Total amount	Amount you Was this still owe	payment for

Official Form 107

Case number (if known)

Debtor 1

Paul Joseph Encinias

■ No

Yes. Fill in the details.

Person Who Was Paid Address Description and value of any property transferred

Date payment or transfer was made Amount of payment

Official Form 107

Name of Financial Institution
Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Address (Number, Street, City, State and ZIP Code)

have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Official Form 107

Part 9:	Identify	Property	y You Hold	or Contro	I for Someone	e Else
---------	----------	----------	------------	-----------	---------------	--------

23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust
	for someone.

Nο

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Kevin Schreiber 1415 41st St Los Alamos, NM 87544	Debtor's residence	2014 VW Jetta SE	\$5,000.00
Kevin Schreiber 1415 41st St. Los Alamos, NM 87544	Debtor's residence	1994 Yamaha street bike (inoperative)	\$1,000.00
Kevin Schreiber 1415 41st St. Los Alamos, NM 87544	Debtor's residence	1994 Toyota Landcruiser (inoperative)	\$1,000.00

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24	Has any governmental unit	notified you that you	may be liable or notentia	Ilv liable under or in violation	of an environmental law?

No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code)

25. Have you notified any governmental unit of any release of hazardous material?

No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code)

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

■ No □ Yes. Fill in the details.			
Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

Official Form 107

Best Case Bankruptcy

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Fill in this inform	nation to identify your case:
Debtor 1	Paul Joseph Encinias
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: District of New Mexico
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this ement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any

additional pages, write your name and case number (if known). Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only.

□ Not married. Fill out Column A, lines 2-11.

■ Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both

				Column Debtor		nn B or 2 or iling spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	0.00	\$ 350.15
Alimony and maintenance payments. Do not include Column B is filled in.	de payme	nts from	a spouse if	\$	0.00	\$ 479.82
All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househout and roommates. Do not include payments from a spoyou listed on line 3. Net income from operating a business,	rt. Included	e regula: depende	contributions nts, parents,	\$	0.00	\$ 0.00
profession, or farm	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	- \$	0.00				
Net monthly income from a business, profession, or fa	arm \$ _	0.00	Copy here ->	\$	0.00	\$ 0.00
Net income from rental and other real property	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$ 0.00

Best Case Bankruptcy

15a. Copy line 14 here=>

829.97

Debtor 1	Paul Joseph Encinias	Case number (if known)		
	Multiply line 15a by 12 (the number of months in a year).		x 12	7
15	o. The result is your current monthly income for the year for this part of the	form	\$\$	

16.	Calcu	ılate t	he median family income that applies to yo	ou. Follow these step	os:		
	16a. F	ill in t	the state in which you live.	NM			
	16b. F	-ill in t	the number of people in your household.	4			
	16c. F	ill in t	he median family income for your state and s	ze of household.		\$67,16°	1.00
			d a list of applicable median income amounts, ctions for this form. This list may also be availa				
17.	How	do the	e lines compare?	·	•		
	17a.		Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				ed under
	17b.		Line 15b is more than line 16c. On the top o 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	ation of Your Dispo			
Part	3:	Calc	culate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)			
18.	Сору	your	total average monthly income from line 11	•		\$	329.97
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	19a. I	f the n	narital adjustment does not apply, fill in 0 on li	ne 19a.		- \$	0.00
	19b. S	Subtra	act line 19a from line 18.			\$82	9.97
20.	Calcu	ılate y	our current monthly income for the year.	Follow these steps:			
	20a. C	Сору I	line 19b			\$82	9.97
	N	Multipl	ly by 12 (the number of months in a year).			x 12	
	20b. T	Γhe re	esult is your current monthly income for the ye	ar for this part of the	form	\$\$	9.64
	20c. 0	Сору t	the median family income for your state and s	ize of household from	n line 16c	\$ 67,16	1.00
	21. I	low d	do the lines compare?				
	•	.	ine 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the cou	rt, on the top of page 1 of this form, che	ck box 3, The comn	nitment
	[ine 20b is more than or equal to line 20c. Unloammitment period is 5 years. Go to Part 4.	ess otherwise ordere	ed by the court, on the top of page 1 of the	nis form, check box	4, The
Part	4:	Sign	n Below				
	By sig	ning l	here, under penalty of perjury I declare that th	e information on this	statement and in any attachments is tru	e and correct.	
X	(
			seph Encinias of Debtor 1				
			ember 30, 2021				
			ked 17a, do NOT fill out or file Form 122C-2.				
	If you	check	ked 17b, fill out Form 122C-2 and file it with th	is form. On line 39 c	f that form, copy your current monthly in	come from line 14 a	above.

Paul Joseph Encinias Debtor 1

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2021 to 10/31/2021.

Non-CMI - VA Income Source of Income: VA

Income by Month:

6 Months Ago:	05/2021	\$2,160.18
5 Months Ago:	06/2021	\$2,160.18
4 Months Ago:	07/2021	\$2,160.18
3 Months Ago:	08/2021	\$2,160.18
2 Months Ago:	09/2021	\$2,160.18
Last Month:	10/2021	\$2,160.18
	Average per month:	\$2,160.18

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 05/01/2021 to 10/31/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Tri-Core

Income by Month:

6 Months Ago:	05/2021	\$0.00
5 Months Ago:	06/2021	\$0.00
4 Months Ago:	07/2021	\$0.00
3 Months Ago:	08/2021	\$0.00
2 Months Ago:	09/2021	\$0.00
Last Month:	10/2021	\$2,100.87
	Average per month:	\$350.15

Line 3 - Alimony and maintenance payments received

Source of Income: Child support

Income by Month:

6 Months Ago:	05/2021	\$479.82
5 Months Ago:	06/2021	\$479.82
4 Months Ago:	07/2021	\$479.82
3 Months Ago:	08/2021	\$479.82
2 Months Ago:	09/2021	\$479.82
Last Month:	10/2021	\$479.82
	Average per month:	\$479.82

Non-CMI - VA Income

Source of Income: VA Disability Benefits

Income by Month:

6 Months Ago:	05/2021	\$2,160.18
5 Months Ago:	06/2021	\$2,160.18
4 Months Ago:	07/2021	\$2,160.18
3 Months Ago:	08/2021	\$2,160.18
2 Months Ago:	09/2021	\$2,160.18
Last Month:	10/2021	\$2,160.18
	Average per month:	\$2,160.18